

**STATE OF MARYLAND  
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT**



**Invitation for Bids (IFB) No. DHCD-16-2  
HOUSING QUALITY STANDARDS (HQS) INSPECTION SERVICES**

**IFB Issue Date:** June 29, 2016

**Procurement Officer:** Amanda Pinder  
7800 Harkins Road, Room 260, Lanham, Maryland 20706  
Phone: (301) 429-7780  
E-mail: [amanda.pinder@maryland.gov](mailto:amanda.pinder@maryland.gov)

**Contract Monitor:** Elaine Cornick  
7800 Harkins Road, Lanham, Maryland 20706  
Phone: (301) 429-7777  
E-mail: [elaine.cornick@maryland.gov](mailto:elaine.cornick@maryland.gov)

**Bids are to be sent to:** Department of Housing and Community Development  
7800 Harkins Road, Room 260, Lanham, Maryland 20706  
Attention: Amanda Pinder

***Mark in the lower left or right-hand corner: "IFB No. DHCD-16-2; MUST BE OPENED BY ADDRESSEE ONLY."***

***Bids must be sealed and clearly labeled exactly as indicated to ensure that they are delivered intact and unopened.***

**Bid Due (Closing) Date and Time:** July 19, 2016, at 2:00 P.M, Local Time

**NOTICE**

A Prospective Bidder that has received this document from the Department of Housing and Community Development's website or eMaryland Marketplace, or that has received this document from a source other than the Procurement Officer, and that wishes to assure receipt of any changes or additional materials related to this IFB, should immediately contact the Procurement Officer and provide the Prospective Bidder's name and email address so that addenda to the IFB or other communications can be sent to the Prospective Bidder.

**Minority Business Enterprises and Certified Small Businesses  
are encouraged to respond to this solicitation.**

## **Summary**

The Department of Housing and Community Development (“DHCD”), a principal department of the State of Maryland (“State”), is seeking the services of a qualified firm or individual to perform Housing Quality Standards (“HQS”) Inspections on an as-needed basis for its federal Section 8 Housing Choice Voucher Program in the Maryland counties of Allegany, Caroline, Cecil, Dorchester, Frederick, Garrett, Kent, Somerset, St. Mary’s, Talbot, Washington, Wicomico, and Worcester.

## **Contract Type**

The Contract resulting from this solicitation shall be an indefinite quantity contract with firm fixed unit prices as defined in COMAR 21.06.03.06.A(2) (indefinite quantity) and 21.06.03.02.A(1)&(2) (fixed price and firm fixed price).

## **Contract Duration**

The duration of the Contract shall be for two (2) years from the date of execution. There are no renewal options.

## **Procurement Officer**

The Procurement Officer is the primary point of contact in the State for purposes of this IFB prior to the award of any Contract. The name and contact information of the Procurement Officer are indicated in the title page.

The Department may change the Procurement Officer at any time by written notice.

## **Contract Monitor**

The Contract Monitor is the State representative for this Contract who is primarily responsible for Contract administration functions after Contract award. The name and contact information of the Contract Monitor are indicated on the title page.

The Department may change the Contract Monitor at any time by written notice.

## **Questions**

Inquiries regarding this IFB should be directed to the Procurement Officer listed on the title page.

## **Procurement Method**

This Contract will be awarded in accordance with COMAR 21.05.07, which governs procurement of services reasonably expected to cost \$25,000 or less.

## **Bid Closing Date and Time**

All bids must be received at the address, and no later than the Bid Due Date and Time, indicated on the title page. **No late bids will be accepted.**

### **Pre-Bid Conference**

No pre-bid conference will be held.

### **Duration of Bid**

Bids submitted in response to this IFB are irrevocable for sixty (60) days following the closing date for bids. The Procurement Officer may extend this period, with the Bidder's written consent.

### **Multiple or Alternate Bids**

Multiple and/or alternate Bids will not be accepted.

### **Award Basis**

The Contract shall be awarded to the responsible Bidder submitting a responsive Bid with ***the most favorable bid price*** (per COMAR 21.05.07.06.D(2)). One (1) award shall be made for this Contract.

### **Substitution of Personnel**

Any substitution of personnel after the Contract has begun must be approved in writing by the Contract Monitor prior to the substitution. If the Contractor substitutes personnel without the prior written approval of the Contract Monitor, the Contract may be terminated.

### **Minority Business Enterprises (MBEs)**

Minority Business Enterprises (MBEs) are encouraged to respond to this solicitation. MBE vendors are encouraged to obtain MBE certification from the Maryland Department of Transportation, Office of Minority Business Enterprise. Direct all certification-related questions to:

Office of Minority Business Enterprise  
Maryland Department of Transportation  
P.O. Box 8755  
BWI Airport, Maryland 21240-0755  
(410) 859-7328  
<http://www.mdot.maryland.gov>

### **Small Businesses**

Although this is not a Small Business Reserve procurement, small businesses are encouraged to respond to this solicitation and to register with the Maryland Department of General Services for the Maryland Small Business Reserve Program through a self-certification process at <https://www.smallbusinessreserve.maryland.gov/registration/>.

A "Small Business" is a business, other than a broker, that meets the following criteria:

- The business is independently owned and operated;
- The business is not a subsidiary of another business;
- The business is not dominant in its field of operation;
- The wholesale operations of the business did not employ more than 50 persons, and the gross sales of the business did not exceed an average of \$4,000,000 in its most recently completed 3 fiscal years;

- The retail operations of the business did not employ more than 25 persons, and the gross sales of the business did not exceed an average of \$3,000,000 in its most recently completed 3 fiscal years;
- The manufacturing operations of the business did not employ more than 100 persons, and the gross sales of the business did not exceed an average of \$2,000,000 in its most recently completed 3 fiscal years;
- The service operations of the business did not employ more than 100 persons, and the gross sales of the business did not exceed an average of \$10,000,000 in its most recently completed 3 fiscal years;
- The construction operations of the business did not employ more than 50 persons, and the gross sales of the business did not exceed an average of \$7,000,000 in its most recently completed 3 fiscal years; and
- The architectural and engineering operations of the business did not employ more than 100 persons, and the gross sales of the business did not exceed an average of \$4,500,000 in its most recently completed 3 fiscal years.

If a business has not existed for three years, the gross sales average is computed for the period of the business's existence. For newly formed businesses the determination will be based upon employment levels and projected gross sales.

#### **Verification of Registration and Tax Payment**

Before a business entity can do business in the State it must be registered with the State Department of Assessments and Taxation (SDAT). SDAT is located at State Office Building, Room 803, 301 West Preston Street, Baltimore, Maryland 21201. The SDAT website is <http://sdatcert3.resiusa.org/ucc-charter/>. It is strongly recommended that any potential Bidder complete registration prior to the due date for receipt of Bids. A Bidder's failure to complete registration with SDAT may disqualify an otherwise successful Bidder from final consideration and recommendation for Contract award.

#### **Mandatory Contractual Terms**

By submitting a Bid in response to this IFB, a Bidder, if selected for award, shall be deemed to have accepted all terms and conditions of this IFB *and* the State's mandatory terms and conditions under COMAR 21.07.01: [http://www.dsd.state.md.us/COMAR/SubtitleSearch.aspx?search=21.07.01.\\*](http://www.dsd.state.md.us/COMAR/SubtitleSearch.aspx?search=21.07.01.*). Any exceptions to this IFB must be raised prior to Bid submission. Changes to the solicitation, including the Bid Form, made by the Bidder may result in Bid rejection.

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## MINIMUM QUALIFICATIONS

The following qualifications must be met to be considered for contract award:

- A. Experience. The Bidder shall have at least three (3) years of experience in providing HQS inspections for federal, Section 8 Housing Choice Voucher Program. Proof of required experience shall be provided in writing with the following information:
1. Name of entity(ies) for which appraisals were performed
  2. Name, complete address, email, and phone number of contact person
  3. Type of appraisal conducted
  4. Dates of service
- B. Certification. All inspectors to be assigned by the Contractor to perform under this Contract shall hold and continue to hold for the full term of the contract a valid certification in HQS inspection from ***at least one (1)*** of the following organizations:
- Nan McKay and Associates, Inc.
  - National Association of Housing and Redevelopment Officials (NAHRO):
  - National Center for Housing Management
  - Quadel Consulting Corporation
  - U.S. Department of Housing and Urban Development (HUD)
- HQS inspection certifications from other nationally recognized, public housing industry trainers that meet the requirements set forth in HUD's "Housing Choice Voucher Program Guidebook" may be used in place of the above-listed certifications, in the Department's discretion.*
- C. Documentation. The Contractor shall document the required experience and certification by attaching a résumé and valid certificate for each inspector proposed to service this contract to attachment A-2, Bid Questionnaire.
- D. Errors and Omissions Insurance. Bidders must have errors and omissions (E&O) insurance coverage with a limit of not less than \$300,000 per occurrence. Document the required E&O insurance coverage by attaching a copy of the current insurance certificate to the bid form questionnaire, Attachment A-2.

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## SCOPE OF WORK

**Detailed Specifications.** The Contractor shall meet all of the following requirements:

1. Confirm in writing that *all* Inspectors performing under this contract meet *all* of the requirements for experience and certification listed under “Minimum Qualifications.”
2. Accept an assignment of work from the Contract Monitor immediately upon receipt of an executed contract, on or about **July 15, 2016**.
3. Provide any transportation required for each Inspector to get to and from the job site, which can include verifying that each Inspector has their own transportation. DHCD shall not reimburse the Contractor for any travel costs associated with work under this Purchase Order.
4. Complete for each inspection the long version of HUD’s Form 52580-A, “Inspection Form: Housing Choice Voucher Program,” found at <http://portal.hud.gov/hudportal/documents/huddoc?id=52580-a.pdf>.
5. Deliver completed 52580-A forms to the Contract Monitor at the end of the work day on which the inspection was completed. The Contract Monitor will be responsible for notifying the owner of failed inspections and re-inspections.
6. The Contractor must be available by phone during regular business hours for the DHCD Cambridge Office, 8:30 a.m. to 5:00 p.m. Eastern Time to answer questions related to scheduled and completed inspections.
7. Re-inspect, on a limited basis, units that failed the initial HQS inspection to ensure that required corrective work was completed and that the unit now passes.
8. Perform an estimated of 150 initial HQS Inspections (move-in, annual, quality control and special inspections) during the Contract year.
9. Inspections are normally scheduled two to four weeks in advance by the Contract Monitor and must be performed on the date scheduled. Inspections are scheduled so as to minimize the distance between stops and “tenant-not-home” situations to the extent possible. An emergency inspection may occasionally be required at short notice at the discretion of the Contract Monitor, with a minimum of one (1) day’s notice.

## **BID FORMAT**

**Required Bid Submissions.** Submit two (2) copies of each of the following documents with original signatures *in a sealed envelope* to the Procurement Officer by the bid due date and time and to the address listed on the title page.

- A. Transmittal Letter. A Transmittal Letter shall accompany the Bid and include the following:
  - 1. Name and address of the Bidder;
  - 2. Name, title, e-mail address, and telephone number of primary contact for the Bidder;
  - 3. Solicitation Title and Solicitation Number that the Bid is in response to;
  - 4. Signature, typed name, and title of an individual authorized to commit the Bidder to its Bid;
  - 5. Federal Employer Identification Number (FEIN) of the Bidder, or if a single individual, that individual's Social Security Number (SSN);
  - 6. Bidder's eMM number;
  - 7. Bidder's MBE certification number (if applicable); and
  - 8. Acceptance of all State IFB and Contract terms and conditions.
- B. Completed Price Bid Form (**Attachment A-1**)
- C. Required documentation of Minimum Qualifications, included in and attached to the Bid Form Questionnaire (**Attachment A-2**)
- D. Copy of current E&O Insurance Certificate, reflecting insurance coverage with a limit of not less than \$300,000 per occurrence.

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## **Bidding Instructions**

1. Bidders shall include: a completed Price Bid Form (Attachment A-1), a completed Bid Form Questionnaire (Attachment A-2), all required minimum qualification documentation, and the required E&O insurance certificate. These items must be sent by mail, addressed as described on the title page, so as to be received by the Procurement Officer **by Tuesday, July 19, 2016, at 2:00 P.M. Local Time.**
2. By submitting a bid, a Bidder shall be deemed to have accepted the terms of this IFB which will be in the form of a Purchase Order. Any exceptions to the terms of the IFB or the resulting Purchase Order must be clearly identified. A bid that takes exception to these terms may be rejected.



**PRICE BID FORM**

*IFB No. DHCD-16-2*  
**HOUSING QUALITY STANDARDS INSPECTION SERVICES**

Bidders are to do the following:

1. In Column B, enter the fixed Price per Task to complete the following tasks according to the “Scope of Services”.
2. Calculate the *Total Bid Price* (Column D) for each task by multiplying the Price Per Task (Column B) by the *Number of Tasks* (Column C).
3. Write the sum of Column D for the *two* tasks next to the **Total, Evaluated, Bid Price**.
4. The **Total, Evaluated, Bid Price** will be used to rank the price bids in order from lowest to highest cost to the State. Contracts will be awarded as described in Section 3 of the IFB.

A	B	C	D
TASK DESCRIPTION (See “Scope of Services” for detailed requirements.)	PRICE PER TASK	NUMBER OF TASKS	TOTAL BID PRICE (B x C)
Initial HQS Inspection (move-in, annual, or quality control inspection)		120	
HQS Re-inspection of a unit that previously failed HQS Inspection		10	
<b>Total, Evaluated, Bid Price \$</b>			

*The number of tasks per year above are estimates only for the purpose of comparing bids and are **not** a guarantee of work assigned.*

*Submitted By:*

*Authorized Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Printed Name & Title:* \_\_\_\_\_

*Bidder Name:* \_\_\_\_\_

*Bidder Address:* \_\_\_\_\_

*Bidder Contact Information: Telephone: (\_\_\_\_\_) \_\_\_\_\_ – \_\_\_\_\_*

*E-mail:* \_\_\_\_\_

*FEIN:* \_\_\_\_\_ *eMM #:* \_\_\_\_\_

*MDE Contractor Accreditation Number:* \_\_\_\_\_

*Small Business Certification Number, if applicable:* \_\_\_\_\_

**BID FORM QUESTIONNAIRE**

*IFB No. DHCD-16-2*  
*HOUSING QUALITY STANDARDS INSPECTION SERVICES*

**Complete each item, attach required documentation, and enclose with Attachment A-2.**

Bidder Name: \_\_\_\_\_

1. **Experience** – Each Inspector assigned by the Contractor to perform HQS Inspections under this Contract shall have at least three years experience performing Housing Quality Standards Inspections. List below the name and number of years of experience in performing HQS Inspections for each inspector who will perform HQS Inspections for DHCD, if awarded. **Attach the resume of each individual documenting this experience.** Attach additional pages if more than 3 Inspectors will perform HQS Inspections under this Contract.

Name: \_\_\_\_\_ Years of HQS inspection experience: \_\_\_\_\_

Name: \_\_\_\_\_ Years of HQS inspection experience: \_\_\_\_\_

Name: \_\_\_\_\_ Years of HQS inspection experience: \_\_\_\_\_

2. **Certification** - Each Inspector assigned by the Contractor to perform HQS Inspections under this Contract shall be certified to perform Housing Quality Standards Inspections as outlined in Section 4.2 of the IFB. List below the name and certification dates for each inspector who will perform HQS inspections for DHCD, if awarded. **Attach certification documentation for each individual.** Attach additional pages if more than 3 Inspectors will perform HQS Inspections under this Contract.

Name: \_\_\_\_\_ Cert. date: \_\_\_\_\_

Certifying organization: \_\_\_\_\_

Name: \_\_\_\_\_ Cert. date: \_\_\_\_\_

Certifying organization: \_\_\_\_\_

Name: \_\_\_\_\_ Cert. date: \_\_\_\_\_

Certifying organization: \_\_\_\_\_

3. **Insurance** - Bidders must have Errors and Omissions (E&O) insurance coverage with a limit of not less than \$300,000 per occurrence. **Attach a copy of the current E&O Insurance certificate.**

Name of E&O Insurance carrier \_\_\_\_\_

Coverage amount \$ \_\_\_\_\_

Effective dates of E&O insurance coverage \_\_\_\_\_